

**EFT-1 Authorization Agreement for Electronic Funds Transfer****Part 1: Complete the taxpayer information**

1 _____
Taxpayer's name

2 _____
Street address

P.O. Box, Suite number

City State ZIP

3 _____ - _____
Federal employer identification number (FEIN)

4 _____ - _____
Illinois business tax (IBT) number

5 _____ - _____ - _____
Social Security number

Note If you are the designated agent and completing this authorization form on behalf of this taxpayer, the taxpayer must sign in Part 6, unless you have a signed Form IL-2848-E in your records for that taxpayer.

Part 2: Complete the designated agent information (Complete only if the designated agent will be making your payments.)

1 _____
Designated agent's name

2 _____
Street address

P.O. Box, Suite number

City State ZIP

3 _____
Contact person's name

4 (_____) (_____) _____
Telephone number Fax number

Note If you choose the ACH debit option and the bank account used to make payments is the designated agent's, an authorized officer of the agent must sign below in order to give the department authorization to debit that account.

5 _____
Signature authorization for EFT Program (Authorized officer of designated agent)

Part 3: Complete the EFT account registration activity

1 ☐ Initial set up ☐ Changes* (Include effective date.) 2 ACH option: (Select only one.) ☐ Debit ☐ Credit

*Specify change _____

Note If you chose the ACH debit option, **you must** complete Part 5 below.

Part 4: Check all tax payments and fees that apply to this authorization agreement

1 Corporate Income Tax	<input type="checkbox"/> IL-1120-ES	<input type="checkbox"/> IL-505-B	10 Electricity Dist. and Invested Capital	<input type="checkbox"/> ICT-1	<input type="checkbox"/> ICT-4
2 Withholding Income Tax	<input type="checkbox"/> IL-501	<input type="checkbox"/> IL-941	11 Gas Revenue Tax	<input type="checkbox"/> RPU-50	<input type="checkbox"/> RG-1
3 Individual Income Tax	<input type="checkbox"/> IL-1040-ES	<input type="checkbox"/> IL-505-I	12 Electricity Excise Tax	<input type="checkbox"/> RPU-50	<input type="checkbox"/> RPU-13
4 Sales and Use Tax	<input type="checkbox"/> RR-3	<input type="checkbox"/> ST-1	13 Telecomm. Taxes (state and local)	<input type="checkbox"/> RPU-50	<input type="checkbox"/> RT-2
5 Automobile Renting Occupation and Use Tax	<input type="checkbox"/> ART-1		14 Telecomm. Infrastructure Maintenance Fees		<input type="checkbox"/> RT-10
6 Chicago home rule municipal soft drink retailers' occupation tax		<input type="checkbox"/> ST-14	15 Tobacco Products Tax		<input type="checkbox"/> TP-1
7 County Motor Fuel Tax		<input type="checkbox"/> CMFT-1	16 Cigarette Tax (ACH debit option only)		<input type="checkbox"/> RC-1-A
8 MPEA Food & Beverage Tax		<input type="checkbox"/> ST-4	17 Hotel Operators' Occupation Tax		<input type="checkbox"/> RHM-1
9 Prepaid Sales Tax	<input type="checkbox"/> PST-3	<input type="checkbox"/> PST-1	18 Liquor Revenue Tax		<input type="checkbox"/> RL-26
			19 Liquor Revenue Airline Tax		<input type="checkbox"/> RL-26-A

Part 5: Complete only if the ACH debit payment option is being used (Consult your financial institution.)

1 _____
Financial institution's name

2 _____
Street address

P.O. Box, Suite number

City State ZIP

3 Account types: ☐ Corporate **OR** ☐ Individual/Consumer
☐ Checking **OR** ☐ Savings

4 _____
Name on account

5 _____
Account number

6 _____
Routing transit number

Note If you pay different tax liabilities using different accounts, you must complete a separate Form EFT-1 for each account. The taxpayer being registered **must sign** each Form EFT-1, unless you have a signed Form IL-2848-E in your records for that taxpayer.

Part 6: Signature authorization of taxpayer, authorized officer, or partner

Under penalties of perjury, I state that I have examined this form and to the best of my knowledge it is true, correct, and complete. The Illinois Department of Revenue is authorized to use this information in accordance with the Department of Revenue Law of the Civil Administrative Code of Illinois and all applicable Illinois tax acts. This agreement shall remain in force until the department receives written notification from the taxpayer.

Signature of taxpayer, authorized officer, or partner

Title

_____/_____/_____
Month Day Year

Note The EFT contact person's information must be completed.

(_____) _____
Contact person's telephone number

(_____) _____
Fax number

EFT contact person (Please print)

Contact person's e-mail address

Mail to: Illinois Department of Revenue, P.O. Box 19015, Springfield, IL 62794-9015 or fax to 217 524-8282.

Form EFT-1 Instructions

General Information

Which parts must I complete?

Everyone must complete Parts 1, 3, 4, and 6.

- Complete Part 2 if you will use a designated agent to transfer payments for you. If you are the designated agent and completing this authorization form on behalf of this taxpayer, be sure to have the taxpayer sign this Form EFT-1 in Part 6, unless you have a signed Form IL-2848-E, Power of Attorney for Electronic Processing, for that taxpayer and keep with your books and records and make it available to us at our request.
- Complete Part 5 if you are using the ACH debit option.

Must I send the payment vouchers or returns?

When you pay by EFT,

- **Do not** mail the payment vouchers (Forms ICT-1, IL-1040-ES, IL-1120-ES, IL-501, IL-505-B, IL-505-I, PST-3, RPU-50, or RR-3).
- You **must file** the following forms (Forms ART-1, CMFT-1, ICT-4, IL-941, PST-1, RC-1-A, RC-6, RC-6-A, RG-1, RHM-1, RL-26, RL-26-A, RPU-13, RT-10, RT-2, ST-1, ST-4, ST-14, and TP-1) by the due date, although you make your payments by EFT.

What if I need help?

If you need assistance, please see Booklet EFT-8, Electronic Funds Transfer Guide, for more information. If you prefer, you may call our Springfield office weekdays between 8 a.m. and 5 p.m. at **1 800 732-8866, 217 782-3336, or 1 800 544-5304**, our TDD (telecommunications device for the deaf). You also may visit our Web site at **www.ILtax.com** or write to us at

ELECTRONIC FUNDS TRANSFER DIVISION
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19015
SPRINGFIELD IL 62794-9015

Specific Instructions

Part 1: Complete the taxpayer information

Lines 1 and 2 — Write your name and address.

Line 3 — Write your federal employer identification number (FEIN).

Line 4 — Write your Illinois business tax (IBT) number.

Line 5 — Write your Social Security number (SSN) if you will pay individual income taxes by EFT.

Part 2: Complete the designated agent information

Complete Part 2 if you will be using a designated agent to transfer payments for you. If you are the designated agent and completing this authorization form on behalf of this taxpayer, be sure to have the taxpayer sign this Form EFT-1 in Part 6, unless you have a signed Form IL-2848-E for that taxpayer and keep it with your books and records and make it available to us at our request.

Note If you choose the ACH debit option and the bank account used to make payments is the designated agent's, an authorized officer of the agent must sign in Part 2, Line 5 in order to give the department authorization to debit that account.

Part 3: Complete the EFT account registration activity

Line 1 — Check the appropriate box to tell us if this the first time you are registering to pay tax by EFT or if you are changing any account information on a Form EFT-1 that you previously filed. If you are changing any account information, please write the correct information on the appropriate lines.

To keep your account current, you must report all changes in financial or business account information (e.g., name, address, telephone number, and account and routing numbers). Please include an effective date for any financial changes.

Line 2 — Check the appropriate box to tell us which payment option you want to use.

If you chose the **ACH credit option**, you must process a pre-notification transaction ("pre-note") at least 10 business days before you make your first remittance. This transaction is a "zero-dollar" or "dummy" transaction used to test the accuracy of account numbers and other features of the processing system. No funds are involved. After we receive your completed and properly signed Form EFT-1, we will give you instructions about initiating a "pre-note."

If you chose the **ACH debit option**, our vendor will initiate a pre-notification transaction ("pre-note") on your behalf. This transaction takes place within 15 days of registration in order to test the accuracy of account numbers, routing transit numbers, and other features of the processing system. No funds are involved. After we receive your completed and properly signed Form EFT-1, we will send you the necessary instructions to follow when making payments by EFT and tell you the date you may begin making payments.

Part 4: Check all tax payments and fees that apply to this authorization agreement

Check the appropriate boxes to tell us which tax payments and fees you want to (or must) pay by EFT.

Part 5: Complete only if the ACH debit payment option is being used

Lines 1 and 2 — Write the name and address of the financial institution.

Line 3 — Check the corporate or individual/consumer account type and check the type of account you will be using, checking or savings.

Lines 4 and 5 — Write your bank account number and routing transit number.

Note Please make sure that all of your account information is complete, correct, and legible.

Part 6: Signature authorization of taxpayer, authorized officer, or partner

Sign your name, title, and date (even if you are using a designated agent).

The EFT contact person should be the person who will be initiating and making the electronic funds transfer. Be sure to include that person's telephone, fax number, and e-mail address, if available.